

PROJECT 10073 RECORD CARD

1. DATE <u>July 1958</u>	2. LOCATION <u>Little Neck, New York</u>	12. CONCLUSIONS		
3. DATE-TIME GROUP Local <u>night</u> GMT <u>not given</u>	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar	<input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical <input checked="" type="checkbox"/> Other <u>UNRELIABLE REPORT</u> <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown		
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE <u>Civilian</u>			
7. LENGTH OF OBSERVATION <u>5 minutes</u>	8. NUMBER OF OBJECTS <u>about 20</u>	9. COURSE <u>Southerly</u>		
10. BRIEF SUMMARY OF SIGHTING <u>About 20 objects in formation like ducks observed at night. Flight from East to SouthEast.</u>			11. COMMENTS <u>Objects observed in 1958. Reported in 1963. Witness was 12 years old at time of sighting. Case considered as an unreliable report due to delay in reporting sighting.</u>	Director X-12 Source Studies ATTN: Archives Branch Maxwell AFB, Alabama
			RETURN TC	K-243-66-1 1-15-1 1958



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON 25, D. C.

March 14, 1963

Where has he
been since
1958?
K.W.

PUBLIC AFFAIRS

MEMORANDUM FOR DIRECTOR OF INFORMATION, USAF

SUBJECT: Referral of Correspondence

The inclosed correspondence is forwarded for consideration and appropriate action to include direct reply to the writer who has not been notified of this referral. Information copy of your reply is not requested.

Incl: Ltr dtd March '63

[REDACTED]
Little Neck, N. Y.

Staff Assistant
Directorate for Special Activities
Room 2D 776, The Pentagon
Liberty 5-6700, Ext. 76462

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mc
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Appendix III

A.F.

U. S. AIR FORCE TECHNICAL INFORMATION SHEET			
<p>This questionnaire has been prepared so that you can give the U. S. Air Force as much information as possible concerning the unidentified aerial phenomena that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes, and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.</p>			
1. When did you see the object?	Day <u>JULY</u> Month <u>58</u> Year <u>Ten</u>	2. Time of day:	Hour _____ Minutes _____
3. Time zone:	(Circle One): <input checked="" type="radio"/> Eastern <input type="radio"/> Central <input type="radio"/> Mountain <input type="radio"/> Pacific <input type="radio"/> Other		
4. Where were you when you saw the object?	<u>AVE</u> [REDACTED] <u>LITTLE NECK</u> <u>N.Y.</u> Nearest Postal Address: _____ City or Town: _____ State or Country: _____		
5. Estimate how long you saw the object.	Miles <u>5</u>	Minutes <u> </u>	Seconds <u> </u>
5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.			
<input checked="" type="radio"/> Certain <input type="radio"/> Fairly certain <input type="radio"/> Not very sure <input type="radio"/> Just a guess			
6. What was the condition of the sky?	(Circle One): <input type="radio"/> Bright daylight <input checked="" type="radio"/> Dull daylight <input type="radio"/> Bright twilight <input type="radio"/> Just a trace of daylight <input type="radio"/> No trace of daylight <input type="radio"/> Don't remember		
7. If you saw the object during DAYLIGHT, TWILIGHT, or DAWN, where was the SUN located as you looked at the object?	(Circle One): <input type="radio"/> In front of you <input type="radio"/> To your left <input type="radio"/> Overhead <input type="radio"/> To your right <input type="radio"/> Don't remember		

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8. IF you saw the object at NIGHT, TWILIGHT, or DAWN, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

a. None
 b. A few
c. Many
d. Don't remember

9. Was the object brighter than the background of the sky?

(Circle One): a. Yes b. No c. Don't remember

10. IF it was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?

(Circle One) a. A mile or more away (a distant car)?
b. Several blocks away?

c. A block away?

d. Several yards away?

e. Other _____

(Circle One for each question)

a. Appear to stand still at any time? Yes No
b. Suddenly speed up and rush away at any time? Yes No
c. Break up into parts or explode? Yes No
d. Give off smoke? Yes No
e. Change brightness? Yes No
f. Change shape? Yes No
g. Flicker, thrash, or pulsate? Yes No
h. Other _____

11. Did the object:

a. Suddenly speed up and rush away at any time? Yes No

b. Break up into parts or explode? Yes No

c. Give off smoke? Yes No

d. Change brightness? Yes No

e. Change shape? Yes No

f. Flicker, thrash, or pulsate? Yes No

g. Other _____

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11. Tell in a few words the following things about the object.

a. Sound I DID NOT HEAR ANY SOUND

b. Color BRIGHT GLOWING SLIVER

12. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, propellers, etc., and especially which side or upper surface, plus an arrow beside the drawing to show the direction the object was moving.

0 0 0 0

0 0 0 0

I SAW ABOUT 20 OF THEM FLYING
IN A V FORMATION, (LIKE DUCKS DO)

13. The edges of the object were:

(Circle One): a. Fuzzy or blurred
 b. Like a bright star
 c. Sharply outlined
 d. Not remembered

a. Other _____

14. If there was MORE THAN ONE object, then how many were there? ABOUT 20
Draw a picture of how they were arranged, and put an arrow to show the direction that they were moving.

0 0 0 0 →

0 0 0 0 →
V - FORMATION

15. Did you observe the object through any of the following?	a. Binoculars <input type="radio"/> Yes <input checked="" type="radio"/> No	b. Telescopes <input type="radio"/> Yes <input checked="" type="radio"/> No
	c. Glasses <input type="radio"/> Yes <input checked="" type="radio"/> No	d. Theodolite <input type="radio"/> Yes <input checked="" type="radio"/> No
	e. Windshield <input type="radio"/> Yes <input checked="" type="radio"/> No	f. Other _____

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20. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

A — B
THEY WENT STRAIGHT FOR A WHILE
THEN BROKE UP, WENT MANY DIFFERENT
DIRECTIONS, THEN FLEW AWAY DISAPPEARED
**IF POSSIBLE, try to guess or estimate what the real size of the object was in its largest dimension.
 feet. CLOUD NOT FEEL**

21. How large did the object or objects appear as compared with one of the following objects held in the hand and/or about arm's length?

(Circle One):

- a. Head of a pin
- b. Pen
- c. Dime
- d. Nickel
- e. Quarter
- f. Half dollar
- g. Silver dollar
- h. Baseball
- i. Grapefruit
- j. Basketball
- k. Other _____

22. How certain are you of your answer to Question 21.

(Circle One):

- a. Very certain
- b. Fairly certain
- c. No very sure
- d. Uncertain

**UPS SIDE DOWNED INTO SPICE
 UNTIL I COULD NOT SEE THEM ANYMORE**

23. How did the object or objects disappear from view? **AFTER THEY BROKE**
UPS SIDE DOWNED INTO SPICE
UNTIL I COULD NOT SEE THEM ANYMORE

24. In order that you can give a clear picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? Have wings made of the, and what changes would it have? Describe in your own words a common object or objects which when put up in the sky would give the same appearance as the object which you saw.

I DONT KNOW WHAT IT WAS

MADE OF.

TO ME IT LOOKED LIKE A SHINY
STAR

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25. Where were you located when you saw the object? (Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane
- e. At sea
- f. Other _____

26. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Flying over an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

I WAS TAKING A WALK THAT NIGHT
AND LOOKED UP AT THE SKY, AND
THEN I SAW THEM

27. If you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following question:

28.1 What direction were you moving? (Circle One)

a. North

b. Northeast

c. East

d. Southeast

e. South

f. Southwest

g. West

h. Northwest

i. North

j. Northeast

k. South

l. Southwest

m. West

n. Northwest

28.2 How fast were you moving? _____ miles per hour.

28.3 Did you stop at any time while you were looking at the object? (Circle One)

(Circle One):

Yes

No

29. What direction were you looking when you first saw the object? (Circle One)

a. North

b. Northeast

c. East

d. Southeast

e. South

f. Southwest

g. West

h. Northwest

i. North

j. Northeast

k. South

l. Southwest

m. West

n. Northwest

30. If you are familiar with bearing terms (angular directions), try to estimate the number of degrees the object is from true North and also the number of degrees it was elevated from the horizon (elevation).

31.1 When it first appeared:

a. From true North _____ degrees

b. From horizon _____ degrees

31.2 When it disappeared:

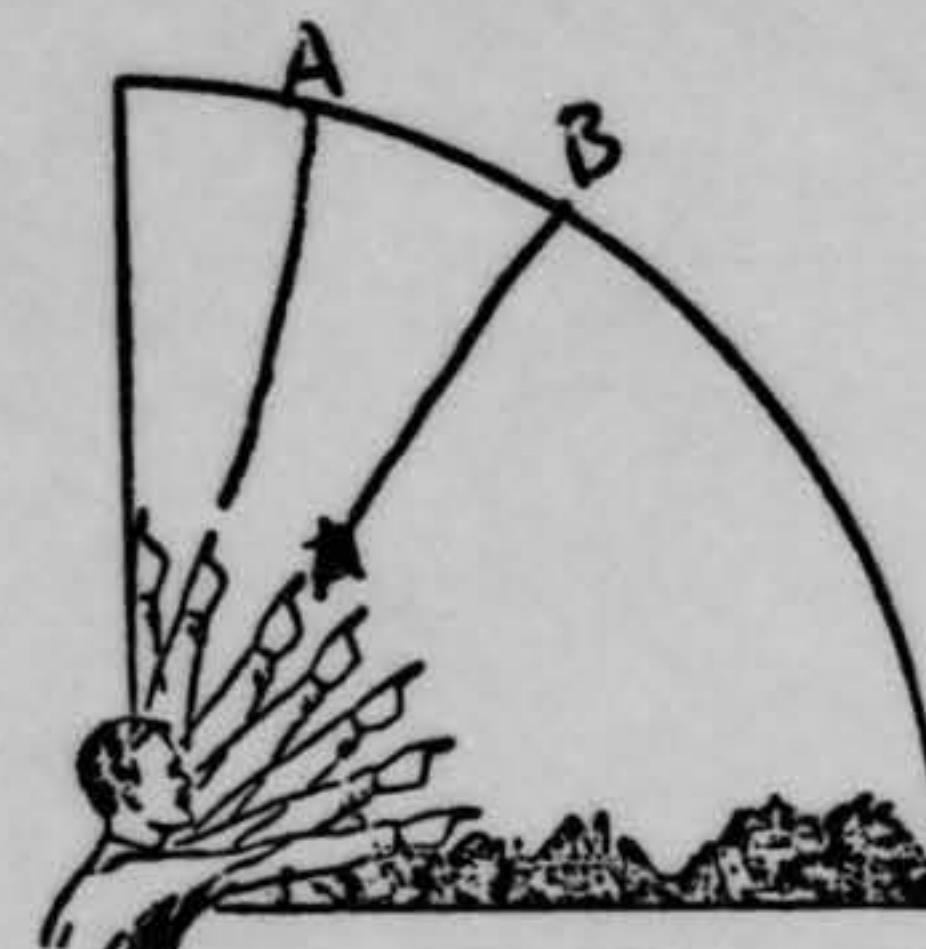
a. From true North _____ degrees

b. From horizon _____ degrees

**NOT FAMILIAR
 WITH BEARING
 TERMS**

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32. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it.



33. In the following larger sketch place an "A" at the position the object was when you first saw it, and a "B" at its position when you last saw it. Refer to smaller sketch as an example of how to complete the larger sketch.

THEY WHERE SOMETHING LIKE THIS
WHEN I FRIST SAW THEM, THEN BROKE
UP AND LEFT



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34. What were the weather conditions at the time you saw the object?

34.1 CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

34.2 WIND (Circle One)

- a. No wind
- b. Slight breeze
- c. Strong wind
- d. Don't remember

34.3 WEATHER (Circle One)

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

34.4 TEMPERATURE (Circle One)

- a. Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't remember

35. When did you report to some official that you had seen the object?

Day _____ Month _____ Year _____

DIDN'T JUST TOLD MY MOTHER

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes No

36.1 If you answered YES, did they see the object too?

(Circle One) Yes No

36.2 Please list their names and addresses:

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes No

37.1 If you answered NO, then when, where, and under what circumstances did you see other ones?

38. In your opinion what do you think the object was and what might have caused it?
I REALY THINK THAT THEY WERE FLYING SAUCERS

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39. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? _____ m.p.h.

40. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? _____

NOT SURE

40,000

foot.

41. Please give the following information about yourself:

NAME _____ Last Name _____

ADDRESS _____ Street _____

LITTLE Neck 62, N.Y.

City

Zone

Street

TELEPHONE NUMBER _____

What is your present job? STUDENT

Age 17

Sex MALE

Please indicate any special educational training that you have had.

a. Grade school _____

b. Technical school _____

b. High school _____

(Type) _____

c. College _____

f. Other special training _____

d. Post graduate _____

TUE. MARCH 63

Day

Month

Year

42. Date you completed this questionnaire:

THOMAS A. EDISON